


PAPERWORK REDUCTION ACT CHANGE WORKSHEET

Agency/Subagency Department of Education, Office of Special Education and Rehabilitative Services		OMB Control Number 1820 -0659
Enter only items that change <div style="display: flex; justify-content: space-around; font-weight: bold; font-size: small;"> Current Record New Record </div>		
Agency form number(s)		
Annual reporting and record keeping hour burden Number of respondents Total annual responses Percent of these responses collected electronically Total annual hours Difference Explanation of difference Program Change Adjustment	<div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 60 60 97 3,615 <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 0 0 <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 0	<div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 60 60 97 3,615 0 0 <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 0
Annual reporting and record keeping cost burden (in thousands of dollars) Total annualized capital/startup costs Total annual costs (O&M) Total annualized cost requested Difference Explanation of difference Program Change Adjustment	<div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 0 0 0 <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 0 <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 0	<div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 0 0 0 0 0 <div style="background-color: black; height: 15px; margin-bottom: 5px;"></div> 0
Other change** The collection form now includes additional clarification edits (received from OESE, since September, 2008) to instructions for completing the data collection tables in the 2008-09 form.		
Signature of Senior Officer or designee: 	Date: 10-29-08	For OIRA Use <hr/> <hr/>

****This form cannot be used to extend an expiration date
OMB 83-C**